CALIFORNIA HOUSING FINANCE AGENCY

Homeownership Programs

1121 L Street, 7th Floor Sacramento, CA 95814 Phone: (916) 324-8088 Fax: (916) 324-6589 homeownership@chfa.ca.gov



APPLICATION TO ORIGINATE LOANS

Submitted by:			
•			
Date:			



Becoming a Loan Originator/Servicer for CHFA

The following information outlines general requirements for originating and servicing loans sold to CHFA. In evaluating your application, CHFA will use certain criteria to assess your company's financial position, insurance coverage, quality control operation, servicing operation, and other relevant factors. CHFA does this to 1) ensure the quality of the loans you intend to sell to CHFA, and 2) to verify that your company is capable of handling the responsibilities associated with originating and servicing loans on our behalf. CHFA encourages you to review the criteria to determine your eligibility for becoming a CHFA approved loan originator/servicer.

The applicant is required to complete this application together with all attachments and have it signed by an authorized officer. When the Application is received by CHFA, you will receive a written response indicating your qualification and the type of approval granted together with any contingency restrictions. Completing this form does not guarantee an automatic approval to originate or service loans for CHFA. Upon granting approval, CHFA will require the following documentation to be provided:

- Receipt of a signed Mortgage Purchase and Servicing Agreement ("MP&SA");
- Executed Opinion of Counsel Letter (Exhibit A in the MP&SA);
- Receipt of a completed Banking Instruction form (Wiring Instructions);
- Receipt of a Master Security Agreement, as applicable, executed by your company and your warehouse lender;
- Letter of Authorization for Tax and Insurance Custodial Account (When Servicing);
- Letter of Authorization for Principal and Interest Custodial Account (When Servicing).

When all required documents are returned to CHFA, your company will be scheduled for mandatory training sessions required for all new CHFA lenders. Training sessions should be attended by your company's key personnel, including your corporate liaison for CHFA business, corporate trainers, loan production/operations staff and all appropriate branch personnel that are responsible for submitting loans to CHFA. The lender-training sessions are on CHFA policy, procedures and the Lender Access System (LAS).

The lender training together with all required documents are required prior to reserving loans and forward commitments on the LAS.



APPLICANT CORPORATE INFORMATION

Incorporation Name (Le	gal):		
Mailing Address:			
(Street	or P. O. Box)		(O:4.)
	(State)	(Zip)	(City)
Telephone: ()			
Under the Name of, doir	ng business as (dba):		
WHERE APPLICANT COMPLETE	IS A BANK, THRIFT O	OR CREDIT UNI	ON, PLEASE
Published Abbreviated	Name (as Listed by IDC Fina	ncial Publishing, lı	nc.
City, State of headquart	ers location (as published b	y IDC Financial Pul	blishing, Inc.)
	LEGAL STATUS OF APP	LICANT	
Incorporated on (Date):			
Under the laws of:			
Mortgage Banker	, corporate headquarters loo	cated in:	
Commercial bank	x, corporate headquarters lo	cated in:	
Thrift, corporate I	neadquarters located in:		
Credit union, cor	porate headquarters located	in:	
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	olication to Originate and ate headquarters located in:	
Other (specify):		
	CORPORATE LIAISON	
Corporate Contact Liaison	Person:	
Title:		
Address:		
(City)	(State)	(Zip)
Telephone: ()		
Fax: ()		
E-mail Address:		
Pri	INCIPAL CORPORATE OFFICERS	S
Name	Title	

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PARENT COMPANY OF APPLICANT (AS APPLICABLE)

Parent Con	npany: Legal Name:	
Mailing Add	dress:	
(City)	(State)	(Zip)
WHERE P	ARENT COMPANY IS A BANK, SAVINGS BAN	K, PLEASE COMPLETE
	Abbreviated Name (as Listed by IDC Financial I k financial rating company)	Publishing, Inc., a bank,
City, State	of headquarters location (as published by IDC Fin	ancial Publishing, Inc.)
Officer Di	sclosure	
	close by a separate attachment whether any cartners, or owners with an interest of 5% or more	
1)	Have been convicted of a crime or named proceeding (excluding traffic violations and other	
2)	Have been subject to an order, judgment, or her from engaging in any activities in connection business transaction (including the purchase acting as (or as an associated or affiliated peradviser, underwriter, broker, dealer, financial business; or	ection with any type of or sale of a security) or erson of) an investment
3)	Have been employed by an institution windebarment by the Department of Housing and U	
	ompany ever been suspended or terminated by Fl tgage insurer, or other investor?	HA/VA, FNMA, FHLMC, a Yes
If yes, for w	hat reason and when?	_

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Please attach the following:

- Resumes of principal officers and key personnel for each functional area;
- Evidence of fidelity bond and errors and omissions coverage in the minimum amount of \$300,000.
- Copy of most recent quality control report and management responses; and
- Copies of any signed contracts with third parties that perform origination, quality control, or servicing functions for the applicant.
- Provide a brief narrative describing the history and general scope of your operations.
- Three business references.

General Qualifications

Are you licensed to origin	nate and sell loans in California?	Yes		No	
Has your company been i years?	in operation for at least three	Yes		No	
Do you have a warehouse in your name?	e line of credit and close loans	Yes		No	
Warehouse Bank's	Name				
Address					
Line of Credit (\$)					
Contact Person & F	Phone Number				
If you have additi information to this	ional lines of credit, please attac application.	ch the ab	ove r	eque	sted
Do you sell loans to other	r investors?	Yes		No	
Do you service loans for o	other investors?	Yes		No	
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Do you have experienced personnel in the following Key functional areas?		Yes No	o 🗌
HUD DE Underwriter?		Yes No	o 🗌
Quality Control?		Yes No	o
Loan Servicing?		Yes No	o 🗌
Mandatory Qualifications			
Do you have an adjusted tangible net worth of at least \$250,000?		Yes No	о [
Do you have a fidelity bond and errors and omissions coverage in the minimum amount of \$300,000?		Yes No	о 🗌
Are you a HUD (FHA) Single Family Servicer?	Yes	N	
Are you a HUD (FHA) Direct Endorsement Lender?		Yes No	о <u></u>
Are you a MERS member (Loan Registry)? (Mandatory requirement for Servicers)		Yes No	D
What is your company's MERS Identification Number?			
If you intend to service CHFA loans, do you employ Collectors full time, 5 days per week from 8 am to 8 pm Pacific Standard Time?		Yes No	o 🗆
Other Affiliations			
Are you a Fannie Mae (FNMA) Seller/Servicer Lender?	Yes	N	
Do you provide financial data electronically to Fannie Mae?		Yes No	o 🗌
Are you a Freddie Mac (FHLMC) Seller/Servicer Lender?		Yes No	o 🗌
Are you a VA Lender?		Yes No	o 🗌
Are you a USDA Rural Housing Service (RHS) lender?		Yes No	o 🗌

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California Loan Origination Branch Locations

Please provide by separate attachment or state your California Lending branch locations:

Street Address	City	
Street Address	City	

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California Loan Origination Branch Locations

Street Address	City
Street Address	City
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For additional branch locations, please attach to Application.

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STATEMENTS OF FINANCIAL CONDITION

Is your company listed by the Security Exchange Commission? Yes No
If yes, which board?
MORTGAGE BANKERS (ONLY)
1) Attach, the last four (4) quarters (complete reports) of the Mortgage Bankers Financial Reporting Form (Fannie Mae Form 1002/Freddie Mac Form 1055/Ginnie Mae Form HUD 11750) The latest statement must be current within thirty (30) days of ending report period.
2) Attach for Servicer and parent company (as applicable), the last two (2) years audited annual Financial Statements prepared by Servicer's independent certified public accountant. The Financial Statements shall be based on the CPA's examination of Servicer's financial statements and the Servicer's loan servicing operations, including those related serviced for CHFA. This report shall also incorporate the Uniform Single Audit Program for Mortgage Bankers. Attach the financial "Adjusted Net Worth" as defined by the audit guide for HUD and GNMA. The audited reports shall also include a balance sheet; an income statement; a statement of retained earnings; a statement of additional paid-in-capital; a statement of changes in financial position and all related notes.
If you are an approved Fannie Mae, Ginnie Mae and or Freddie Mac Seller/Servicer, mortgage companies are required to provide quarterly "Mortgage Banker Financial Reporting" data electronically. If so approved, do you authorize same to forward your financial data to California Housing Finance Agency on a quarterly basis? Yes No
We hereby authorize Fannie Mae (Form 1002), Ginnie Mae (Form HUD 11750) and Freddie Mac (Form 1055) to release Mortgage Banker's Financial Reporting data, as applicable, to California Housing Finance Agency on a quarterly basis:
By:
Authorized Signature
Name and Title:
Company:
Date:
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BANKS, THRIFTS AND CREDIT UNIONS

Attach, the last four (4) quarters (complete reports) of your "Call Report, "Thrift Financial Report" or other financial statement reporting form. The latest statement must be within thirty (30) days of ending period.



SERVICING INFORMATION

If your company is selected as a CHFA Lender, how will the CHFA originated loans be serviced?

Company will coming the loops
Company will service the loans.
When checked, has your company had previous experience servicing CHFA loans? Yes No
Provide the period during which your company serviced CHFA loans (as applicable):
From (Period) through (Period)
Loans will be service-released to a CHFA Approved Servicer.
When checked, please indicate the name and servicing address of the company you will service release loans to:
Name of Company
Address
Contact Person with Telephone Number
A "Private Label Servicer", as sub-servicer for company, will service loans. *
Loans will be sub-serviced by a CHFA Approved Servicer.*
When checked, please indicate the name and servicing address of the Private Label Servicer or Sub-servicer below:
Name of Company
Address
Contact Person with Telephone Number

A separate Servicer Application and Servicing Agreement will be required for Servicer or Sub-servicer that is not currently an Approved CHFA Servicer. Upon request, CHFA will forward these documents together with an Approved Servicer listing.

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COMPLETE ONLY WHERE APPLICANT WILL SERVICE CHFA LOANS

Servicing Manager (print)		Area Code	Phone N	umber
Mailing Address:				
(City)	(State)	(Zip)		
Telephone: ()				
Fax: ()				
E-mail Address:				
Does your company micro	ofiche all collateral/o	rigination files?	Yes	No
Does your company maint	ain hazard insuranc	e policies?	Yes	No
If "no", does your compan	y have a blanket ins	urance policy?	Yes	No
List the primary service lo	cation (where the Cl	IFA loans will be	serviced):	
(In a separate attachment,	provide a list of any	other servicing I	ocations.)	
State the telephone hours State your collection hour			borrowers: _	
Pacific Mount	ain Central	Eastern		
Does your staff utilize eve	ning collection hour	s?	Yes	No
If so, please state the hou	rs:			
Does your staff utilize Sate	urday collection hou	rs?	Yes	No
If so, please state the hou				
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COMPLETE ONLY WHERE APPLICANT WILL SERVICE CHFA LOANS

Does your company utilize automated telephone calling for delinquent loans? Yes No
If yes, please indicate the degree of delinquency when utilized:
30-Day
If yes, in addition, does your company utilize collection personnel for 30-day Delinquent loans?
How many full time collectors does your company employ?
How many part time collectors does your company employ?
How many residential loans do you service?
What is the ratio of serviced loans per full time employee?(Loans divided by number of full time employees)
COMPUTER SERVICE BUREAU, AS APPLICABLE
COMPUTER SERVICE BUREAU, AS APPLICABLE List the name, address and phone number of your company's computer service (if in-house, please state):
List the name, address and phone number of your company's computer service (if
List the name, address and phone number of your company's computer service (if



COMPLETE ONLY WHERE APPLICANT WILL SERVICE CHFA LOANS

SERVICER ORGANIZATION CONTACT LIST

CORPORATE Servicing Address: **ADMINISTRATION** Servicing Manager: Phone: Title: Fax:_____E-mail:_____ Audit Contact:_____Phone:_____ Title: ______ Fax: E-mail: **FINANCIAL** Chief Operating Officer_____Phone: ____ Title: Fax:_____E-mail:_____ **Investor Accounting** Manager: Phone: Fax: E-mail:



COMPLETE ONLY WHERE APPLICANT WILL SERVICE CHFA **LOANS**

Servicer Organization Contact List

Customer Service

Manager:	Phone:	
Title:		
Fax:	E-mail:	
Borrower Escrow Accounts		
Manager:	Phone:	
Title:		
Fax:	E-mail:	
Collections		
Manager:	Phone:	_
Title:		
Fax:	E-mail:	
Default Reporting:	Phone:	
Manager:	Phone:	
Title:		
Fax:	E-mail:	
BANKRUPTCY		
Manager:	Phone:	
Title:		
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Аp	pli	icat	ion	to	Originat	e and	Service	Loans
----	-----	------	-----	----	----------	-------	---------	-------

______E-mail:____

COMPLETE ONLY WHERE APPLICANT WILL SERVICE CHFA LOANS

Servicer Organization Contact List

Loss Mitigation

Manager:	Phone:	
Title:		
Fax:		
Default Reporting:	Phone:	
Title:		
Fax:	E-mail:	
Foreclosures		
Manager:	Phone:	
Title:		
Fax:	E-mail:	

AUDIT EXAMINATION REPORTS

Attach your latest servicing examination (audit) reports available from HUD (FHA) and FNMA (if more than one servicing location, attach the servicing examination reports for the proposed CHFA loan servicing location).



DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY) COMPLETE ONLY WHERE SERVICING LOANS

California Total Only:	Single Family Serviced Loans: As of: 12/31/2000				
	Dollars	Number of Loans	Delinquency		
	(in Millions		Ratio	(#)	
	•				
Total Portfolio Bal.:	\$	#		%	
30-Day Delinquency:	\$	#		%	
60-Day Delinquency:	\$	#		%	
90-Day Delinquency:	\$	#		%	
120 Day & Over Del:	\$	#	_	%	
Total Delinquency:			_	%	
* Annualized REO Fo	reclosures:			%	
California Total Only:	Single Family S	erviced Loans: As of: 1	2/31/2001		
	Dollars	Number of Loans	Delinquency		
	(in Millions	in Thousands)	Ratio	(#)	
	•	 _			
Total Portfolio Bal.:	\$	#		%	
30-Day Delinquency:	\$		_	%	
60-Day Delinquency:	\$	#		<u></u> %	
90-Day Delinquency:		#		%	
120 Day & Over Del:	\$	#		%	
Total Delinquency:				%	
* Annualized REO Fo	reclosures:			%	
California Total Only:	Single Family S	erviced Loans: As of: 2	2002 (Month):_		
	Dollars	Number of Loans	Delinquency		
	(in Millions	in Thousands)	Ratio	(#)	
	•				
Total Portfolio Bal.:	•	#		%	
30-Day Delinquency:	\$	#		%	
60-Day Delinquency:				%	
90-Day Delinquency:	\$	#		%	
120 Day & Over Del:	\$	#		%	
Total Delinquency:			_	%	
* Annualized REO Fo	reclosures:			%	

Total is defined as Servicer's California Total Single Family Servicing Portfolio

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DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY) COMPLETE ONLY WHERE SERVICING LOANS

California FHA FRMs Only: Single Family Serviced Loans: As of: 12/31/2000

	Dollars (in Millions	Number of Loans in Thousands)	Delinquency Ratio	(#)
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:	\$			%
60-Day Delinquency:	\$	_ #	_	%
90-Day Delinquency:	\$	_ #		%
120 Day & Over Del:	\$			%
Total Delinquency:				%
* Annualized REO Fo	reclosures:			%
California FHA FRMs	Only: Single Fami	ly Serviced Loans: As	of: 12/31/2001	
	Dollars	Number of Loans	Delinquency	
	(in Millions	in Thousands)	Ratio	(#)
	•	•		
Total Portfolio Bal.:	\$	_ #		%
30-Day Delinquency:	\$	_ #	_	%
60-Day Delinquency:	\$	_ #	_	%
90-Day Delinquency:	\$	_ #		%
120 Day & Over Del:	\$			%
Total Delinquency:				%
* Annualized REO Fo	reclosures:			%
California FHA FRMs	Only: Single Fami Dollars (in Millions	ily Serviced Loans: As Number of Loans in Thousands)	of: 2002 (Mon Delinquency Ratio	nth): (#)
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:				%
60-Day Delinquency:	-	#		%
90-Day Delinquency:	-	#		%
120 Day & Over Del:	\$			%
Total Delinquency:				%
* Annualized REO For	reclosures:			%



DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY) COMPLETE ONLY WHERE SERVICING LOANS

California VA Only: Single Family Serviced Loans: As of: 12/31/2000

	Dollars (in Millions	Number of Loans in Thousands)	Delinquency Ratio	(#)
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:	· 	#		%
60-Day Delinquency:	\$	#		%
90-Day Delinquency:	\$	#		%
120 Day & Over Del:	\$	#		%
Total Delinquency:	,			%
* Annualized REO Fo	reclosures:			<u>%</u>
California VA Only: S	Single Family Service	ed Loans: As of: 12/3	31/2001	
	Dollars	Number of Loans	Delinquency	
	(in Millions	<u>in Thousands)</u>	Ratio	<u>(#)</u>
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:		#		%
60-Day Delinquency:		#		%
90-Day Delinquency:	\$	#		
120 Day & Over Del:	\$	#		%
Total Delinquency:	<u> </u>	<i>"</i>		%
* Annualized REO Fo	reclosures:			%
California VA Only: S	Single Family Service	ed Loans: As of: 200	02 (Month):	
	Dollars	Number of Loans	Delinquency	
	(in Millions	<u>in Thousands)</u>	Ratio	<u>(#)</u>
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:		#		%
60-Day Delinquency:		#		%
90-Day Delinquency:	\$	#		%
120 Day & Over Del:	\$	#		%
Total Delinquency:	'			%
* Annualized REO For	reclosures:			%



DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY) COMPLETE ONLY WHERE SERVICING LOANS

California RHS Only: Single Family Serviced Loans: As of: 12/31/2000

	Dollars (in Millions	Number of Loans <u>in Thousands)</u>	Delinquency Ratio	(#)
Total Portfolio Bal.:		·		<u>~</u>
	\$	#		0/
30-Day Delinquency: 60-Day Delinquency:	:			0/
90-Day Delinquency:				/^ /%
120 Day & Over Del:		#		%
Total Delinquency:	\$	#		/\ /\
* Annualized REO Fo	reclosures:			% %
California RHS Only:	Single Family Se	erviced Loans: As of: 12	2/31/2001	
	Dollars	Number of Loans	Delinquency	
	(in Millions	<u>in Thousands)</u>	Ratio	(#)
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:				%
60-Day Delinquency:		#		0/
90-Day Delinquency:	\$	#		%
120 Day & Over Del:	\$			<u></u> %
Total Delinquency:				<u></u> %
* Annualized REO Fo	reclosures:			<u></u> %
California RHS Only:	Single Family Se	erviced Loans: As of: 2	002 (Month):_	
	Dollars	Number of Loans	Delinquency	
	(in Millions	<u>in Thousands)</u>	Ratio	(#)
Total Portfolio Bal.:	\$	#		%
30-Day Delinquency:	\$			<u></u> %
60-Day Delinquency:				<u></u> %
90-Day Delinquency:		#		
120 Day & Over Del:	\$			<u></u> %
Total Delinquency:				<u></u> %
* Annualized REO Fo	reclosures:			<u></u> %

RHS is defined as USDA Rural Housing Service

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DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY) COMPLETE ONLY WHERE SERVICING LOANS

California Conventional FRMs Only: Single Family Serviced Loans: As of: 12/31/2000

	Dollars (in Millions	Number of Loans in Thousands)	Delinquency Ratio (#)
Total Portfolio Bal.:	\$	#	%
30-Day Delinquency:	\$		
60-Day Delinquency:	-		%
90-Day Delinquency:	\$	#	%
120 Day & Over Del:	\$	#	
Total Delinquency:	*	<u> </u>	<u></u>
* Annualized REO Fo	reclosures:		%
California Convention 12/31/2001	nal FRMs Only: Si	ngle Family Serviced L	oans: As of:
	Dollars	Number of Loans	Delinquency
	(in Millions	in Thousands)	Ratio (#)
	1		
Total Portfolio Bal.:	\$	#	%
30-Day Delinquency:	\$		%
60-Day Delinquency:		#	<u></u> %
90-Day Delinquency:	\$	#	%
120 Day & Over Del:		#	%
Total Delinquency:		_	%
* Annualized REÓ Fo	reclosures:		%
California Convention (Month):		ngle Family Serviced L	oans: As of: 2002
	Dollars	Number of Loans	Delinguency
	(in Millions	<u>in Thousands)</u>	Ratio (#)
Total Portfolio Bal.:	\$	#	%
30-Day Delinquency:	'	#	
60-Day Delinquency:			
90-Day Delinquency:	<u> </u>	# #	
120 Day & Over Del:	<u> </u>	# #	
Total Delinquency:	Ψ		
* Annualized RFO Fo	raclasuras:		/0 %

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COMPLETE AND ATTACH THIS PAGE

ACKNOWLEDGEMENT

I affirm that all information submitted with and attached to this application is true and correct. I hereby authorize CHFA, at its discretion, to verify the information with any other sources, and I hereby waive any cause of action or claim I may have against such sources with respect to any information they may provide.

Ву:		
	Authorized Signature	
Name and Title:		
Company:		
Date:		

(AFFIX CORPORATE SEAL, AS APPLICABLE)

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